



Village of Canal Winchester

36 South High Street
Canal Winchester, Ohio 43110-1213

Divisions of Streets (614) 834-5100

STREET CLOSURE PERMIT

Rev. 07/28/2010

APPLICANT

Name _____

Address _____

Daytime Phone _____ Email _____

ORGANIZATION (If Applicable)

Name _____

Address _____

Daytime Phone _____ Email _____

Date of Closure _____ Hours of Closure _____

Streets to be Closed _____

Attach a drawing showing closure locations.

**I certify that the information provided with this application is correct and accurate
to the best of my ability.**

Applicant's or Authorize Agent's Signature

Date

DO NOT WRITE BELOW THIS LINE

Date Received: ____ / ____ / ____

Application Approved: ____ Yes ____ No

Date of Action: ____ / ____ / ____

Conditions: A vehicular lane shall be available at all
times for emergency vehicle use. _____

Expiration Date: ____ / ____ / ____

Mayor